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CONFIRMATION NO. 6749

<b>SERIAL NUMBER</b> 10/511,707	<b>FILING OR 371(c) DATE</b> 10/15/2004 <b>RULE</b>	<b>CLASS</b> 536	<b>GROUP ART UNIT</b> 1623	<b>ATTORNEY DOCKET NO.</b> 09857/0201259-US0	
<b>APPLICANTS</b> Tsuyoshi Shimoboji, Gotenba-shi, JAPAN;					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/JP03/04949 04/18/2003 <i>ESO</i>					
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 2002-116508 04/18/2002 JAPAN 2002-209429 07/18/2002 <i>ESO</i> JAPAN 2002-331551 11/15/2002					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Eric S. Olson</i> <i>ESO</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 14	<b>TOTAL CLAIMS</b> 23	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 7278					
<b>TITLE</b> Hyaluronic acid modification product					
<b>FILING FEE RECEIVED</b> 1004	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		